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| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new non-provisional applications under 37 CFR 1.53(b)) | | Attorney Docket No. | DM-6909-B |
| | | First Named Inventor or Application Identifier | |
| | | Arner et al. | |
| | | Express Mail Label No. | EL698627561US |
| | | Express Mailing Date | August 9, 2000 |

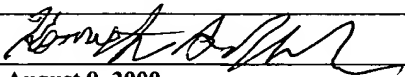
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| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent applications contents. | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 | |
| <p>1. <input checked="" type="checkbox"/> Fee (Authority to charge deposit account below.) (Submit an original, and duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 72] (preferred arrangement set forth below)</p> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Application (if needed)- Statement Regarding Fed sponsored R&D (if needed)- Reference to Microfiche Appendix (if needed)- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claims [Total 64]- Abstract of the Disclosure <p>3. <input type="checkbox"/> Drawing(s) (35 USC 113 [Total Pages <input type="checkbox"/>]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2]</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 14 completed)i. <input type="checkbox"/> DELETION OF INVENTORS Signed Statement below at Box 15 deleting inventor(s) named in the prior application; see 37 CFR 1.63(d)(2) and 1.33(b). <p>5. <input type="checkbox"/> Incorporation by Reference (useable if Box 4b is checked). The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> | | <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submissions (if applicable, all necessary)</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies |
| ACCOMPANYING APPLICATION PARTS | | |
| <p>8. <input type="checkbox"/> Power of Attorney</p> <p>9. <input type="checkbox"/> Information Disclosure Statement (IDS) Cover <input type="checkbox"/> Copies of IDS Citations Letter plus PTO-1449</p> <p>10. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>11. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>12. <input type="checkbox"/> Certified Copy priority Document(s) (if foreign priority is claimed)</p> <p>13. <input type="checkbox"/> Other</p> | | |
| <p>14. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior Application No.: 09/122,126</p> | | |
| <p>15. <input type="checkbox"/> DELETION OF INVENTOR(S) STATEMENT: This application is being filed by less than all the inventors named in the prior application. In accordance with 37 CFR 1.63(d)(2) and 1.33(b), the Assistant Commissioner is requested to delete the name(s) of the following person or persons who are not inventors of the invention being claimed in this application:</p> <p>16. <input type="checkbox"/> AMEND THE SPECIFICATION BY INSERTING BEFORE THE FIRST LINE THE SENTENCE:</p> <p>17. <input type="checkbox"/> Cancel in this application original claims ____ of the prior application before calculating the filing fee. (At least one original independent claim is retained for filing purposes.)</p> | | |

Attorney Docket No.: DM-6909-B

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| 18. Priority of foreign Application No. _____ filed on _____ in _____ _____ is claimed under 35 U.S.C. 119. | | | | | |
| CLAIMS | (1) FOR | (2) NUMBER FILED | (3) NUMBER EXTRA | (4) RATE | (5) CALCULATIONS |
| | TOTAL CLAIMS (37 CRR 1.16(c)) | - (20) = | | x \$ (18) = | |
| | INDEPENDENT CLAIMS (37 CFR 1.16(b)) | - (3) = | | x \$ (78) = | |
| | MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | = \$270 = | |
| | | | | BASIC FEE (37 CFR 1.16(a)) | \$690.00 |
| | | | | TOTAL = | \$690.00 |
| 19. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 04-1928: | | | | | |
| a. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.16. | | | | | |
| b. <input type="checkbox"/> Fees required under 37 CFR 1.17 | | | | | |
| 20. <input type="checkbox"/> Other: | | | | | |

| 21. CORRESPONDENCE ADDRESS | | | | | |
|----------------------------|--|-----------|--------------|----------|--------------|
| NAME | Kenneth B. Rubin | | | | |
| ADDRESS | DuPont Pharmaceuticals Company | | | | |
| | c/o E.I. duPont de Nemours and Company | | | | |
| | Legal-Patents | | | | |
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| COUNTRY | U.S.A. | TELEPHONE | 302-992-3215 | FAX | 302-992-6659 |

| 22. SIGNATURE OF ATTORNEY OR AGENT REQUIRED | | |
|---|---|------------------|
| NAME | Kenneth B. Rubin | REG. NO.: 36,259 |
| SIGNATURE |  | |
| DATE | August 9, 2000 | |